MELLEN MANOR

450 1	LAKE	DRIVE
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MELLEN 54546 Phone: (715) 274-5706		Ownership:	Limited Liability Partnership
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/03):	40	Title 18 (Medicare) Certified?	No
Total Licensed Bed Capacity (12/31/03):	40	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	34	Average Daily Census:	34

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/03)	Length of Stay (12/31/03)	8
Home Health Care Supp. Home Care-Personal Care	No No	 Primary Diagnosis 			웅		23.5 47.1
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	8.8		20.6
Day Services	No		50.0	•	8.8	•	
Respite Care Adult Day Care		Mental Illness (Other) Alcohol & Other Drug Abuse		75 - 84 85 - 94	29.4 50.0	 *******************	91.2
Adult Day Health Care	No		0.0	95 & Over		Full-Time Equivalent	
Congregate Meals Home Delivered Meals	No No	Cancer Fractures	0.0	 	100.0	, , , , , , , , , , , , , , , , , , , ,	ldents
Other Meals	No			 65 & Over			
Transportation	No	Cerebrovascular				RNs	8.9
Referral Service Other Services	No No	Diabetes	11.8	Gender 	%	LPNs Nursing Assistants,	7.8
Provide Day Programming for	INO	Respiratory Other Medical Conditions	5.9	•	38.2		41.5
Mentally Ill	No	i I		Female	61.8	Ì	
Provide Day Programming for	Ma		100.0		100.0		
Developmentally Disabled	No				100.0		

Method of Reimbursement

		edicare itle 18			Medicaid Sitle 19			Other		:	Private Pay			amily Care			anaged Care			
Level of Care	No.	olo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	્ર	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	30	96.8	114	0	0.0	0	3	100.0	130	0	0.0	0	0	0.0	0	33	97.1
Intermediate				1	3.2	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		31	100.0		0	0.0		3	100.0		0	0.0		0	0.0		34	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/03
Deaths During Reporting Period					% Needing		Total
Percent Admissions from:	i	Activities of	%		sistance of	% Totally	Number of
Private Home/No Home Health	5.9	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	5.9	Bathing	5.9		47.1	47.1	34
Other Nursing Homes	35.3	Dressing	17.6		38.2	44.1	34
Acute Care Hospitals	35.3	Transferring	55.9		11.8	32.4	34
Psych. HospMR/DD Facilities	0.0	Toilet Use	23.5		38.2	38.2	34
Rehabilitation Hospitals	0.0	Eating	61.8		26.5	11.8	34
Other Locations	17.6	*****	*****	*****	******	******	*****
Total Number of Admissions	17 I	Continence		용	Special Treatmen	ts	용
Percent Discharges To:	1	Indwelling Or Extern	al Catheter	0.0	Receiving Resp	iratory Care	0.0
Private Home/No Home Health	5.6	Occ/Freq. Incontinen	t of Bladder	29.4	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	11.1	Occ/Freq. Incontinen	t of Bowel	29.4	Receiving Suct	ioning	0.0
Other Nursing Homes	11.1	-			Receiving Osto	my Care	0.0
Acute Care Hospitals	38.9	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	0.0	Receiving Mech	anically Altered Diets	23.5
Rehabilitation Hospitals	0.0				_	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	33.3	With Pressure Sores		2.9	Have Advance D	irectives	97.1
Total Number of Discharges	į	With Rashes		8.8	Medications		
(Including Deaths)	18				Receiving Psyc	hoactive Drugs	52.9

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:			
	This	Pro	prietary	Und	er 50	Ski	lled	Al	1	
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities	
	%	8	Ratio	%	Ratio	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	85.0	80.8	1.05	89.7	0.95	84.0	1.01	87.4	0.97	
Current Residents from In-County	61.8	73.7	0.84	66.7	0.93	76.2	0.81	76.7	0.80	
Admissions from In-County, Still Residing	35.3	19.8	1.79	28.0	1.26	22.2	1.59	19.6	1.80	
Admissions/Average Daily Census	50.0	137.9	0.36	74.8	0.67	122.3	0.41	141.3	0.35	
Discharges/Average Daily Census	52.9	138.0	0.38	78.2	0.68	124.3	0.43	142.5	0.37	
Discharges To Private Residence/Average Daily Census	8.8	62.1	0.14	14.1	0.63	53.4	0.17	61.6	0.14	
Residents Receiving Skilled Care	97.1	94.4	1.03	81.4	1.19	94.8	1.02	88.1	1.10	
Residents Aged 65 and Older	91.2	94.8	0.96	90.0	1.01	93.5	0.97	87.8	1.04	
Title 19 (Medicaid) Funded Residents	91.2	72.0	1.27	74.0	1.23	69.5	1.31	65.9	1.38	
Private Pay Funded Residents	8.8	17.7	0.50	16.0	0.55	19.4	0.45	21.0	0.42	
Developmentally Disabled Residents	0.0	0.8	0.00	0.4	0.00	0.6	0.00	6.5	0.00	
Mentally Ill Residents	70.6	31.0	2.27	60.6	1.16	36.5	1.93	33.6	2.10	
General Medical Service Residents	5.9	20.9	0.28	11.3	0.52	18.8	0.31	20.6	0.29	
Impaired ADL (Mean)	51.8	45.3	1.14	46.5	1.11	46.9	1.10	49.4	1.05	
Psychological Problems	52.9	56.0	0.95	62.3	0.85	58.4	0.91	57.4	0.92	
Nursing Care Required (Mean)	4.4	7.2	0.61	5.0	0.88	7.2	0.62	7.3	0.60	